# EXHIBIT 83 (Part 1)

7

IND

QTY

PRICE

Page No. 12 05/31/95

DATE

inv Type

NDC

ID CA-UC-04

DESCRIPTION

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			##### AT	=	400.40	20.45
07/13/94	M	00025191131	CALAN SR	I	100.00	92.46
07/13/94	W	00088177147	CARDIZEN 30MG 100CT	s	100.00	34.20
07/13/94	W	00049276066	Cardura (Doxazosin Mesylate) Oral Tablet	8	100.00	69.65
07/13/94	M	00009022501	CLBOCIN HCL 150 MG HFC	I	16.00	15.43
07/13/94	W	00007336203	COMPAZINE (PROCHLORPERAZINE) SUPPOSITORY 2	s	12.00	26.71
07/13/94	W	00056017070	COUMADIN	S	100.00	44.66
07/13/94	W	00031425063	DOWNATAL TABLETS	N	100.00	10.06
07/13/94	W	00046042281	INDERAL TABS 20 MG NDA-16-418	I	100.00	33.71
07/13/94	W	0000600506B	INDOCIN 50MG CAPSULE 100	1	100.00	69.59
07/13/94	M	00006015030	INDOCIN 50MG SUPPOSITORY 30	8	30.00	36.71
07/13/94	W	00075070000	LOZOL	s	100.00	51.49
	W	00009005604	MEDROL 4 MG CT	I	21.00	9.24
07/13/94	M	00078000305	MBLLARIL 25MG	I	100.00	31.48
07/13/94	W	00037421330	ORGANIDIN	N	, .	480.00 62.28
07/13/94	M	00062178115	ORTHO NOVUM 7/7/7 28 TABLETS	s	168.00	113.89
07/13/94	M	00045034260	PANCREASE/NT (r) pancrelipase capsules	N	100.00	54.95
07/13/94	W	00029321120	PAXIL (PAROXETINE HCL)	s	100.00	154.79
07/13/94	W	00597001901	PERSANTINE (DIPYRIDAMOLE USP) TABLETS, 75MG	1	100.00	58.41
07/13/94	W	00087047603	POLY-VI-FLOR CHEWABLE TABLETS W/IRON 1.0	N	100.00	13.26
07/13/94	M	00046086881	PREMARIN TABS, .3 MG NDA-04-782	ន	100.00	21.73
07/13/94	W	00087058005	QUESTRAN	B	378.00	29.47
07/13/94	W	00062027501	RETIN-A CREAM .1% 45 GM TUBE	ន	45.00	48.24
07/13/94	W	00062017512	RETIN-A CREAM .05% 20 GM TUBE	s	20.00	21.95
07/13/94	W	00009030503	ANSAID 100 MG PCT	s	100.00	96.69
07/13/94	W	00009074203	MOTRIN 600 MG FCT	I	100.00	12.53
07/13/94	W	00006072068	VASERETIC 10-25 TABLET 100	8	100.00	87.07
07/13/94	W	00005248923	VERBLAN CAPSULES 180 MG 100	8	100.00	87.71
07/13/94	W	00071053223	ACCUPRIL (QUINAPRIL HCL) TABLETS	s	90.00	66.61
07/13/94	W	00026885151	NIFEDIPINE CC 60MG BTLE 100 EXTENDED REL	I	100.00	118.84
07/13/94	W	58887011530	ANAFRANIL (CLOMIPRAMINE HYDROCHLORIDE)	B	100.00	64.65
07/13/94	W	00009030530	ANSAID TABLETS 100 MG 2,000 CNT PLASTIC	8	100.00	97.63
07/13/94	W	00029609022	ALEMENTIN (AMOXICILLINGALVULANIC ACID) SUS	2	150.00	39.29
07/13/94	W	00075006037	AZNACORT	s	20.00	33.90
07/13/94	W	00087081841	BUSPAR	S	100.00	48.99
07/13/94	W	00088179742	CARDIZEM CD 240MG 90CT	g	90.00	130.13
07/13/94	W	00009332901	CLEOCIN T TOPICAL 1 PCT LOTION	s	60.00	21.73
07/13/94	W	00009311602	CLEOCIN T TOPICAL 1 PCT SOLUTION	s	60.00	18.87
07/13/94	W	00009344801	CLEOCIN VAGINAL CREAM 2% 40 GRAM TUBE	S	40.00	23.85
07/13/94	W	00085056701	ELOCON CREAM 0.1% 15GM TUBE	8	15.00	11.96
	W	00074631613	ERYTH ST 500MG ERTHROMYCIN STEARATE USP	N	100.00	14.38
(3)	W	00126236193	GEL-KAM HOME CARE 4.3 OZ MINT	N	4.30 /	29.00 14.38
	W	00085078701	K-DUR TABLETS 20M EQ 100 PER BOTTLE	S	100.00	29.41
500 - 0 100 0			LOTRIMIN CREAM 14 15GM TUBE	I	15.00	8.87
5 2			NEVACOR 40MG TABLET 60UU	s	, 60.00	176.11
			nasacort nasal inhaler	s		0.00 30.77
100			NIZORAL SHAMPOO	g		20,00 13.54
		00078001715		s	30.00	
		00003017850		s	100.00	146.98
07/13/94	W	00187039631	SOLAQUIN CREAM 4%	N	·	28.35 24.30

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DATE	INV Type	NDC	DESCRIPTION	IND	QTY	PRICE
07/13/94	W	00072830360	T-STAT PADS	и	60.00	15.13
07/13/94	W	00072830060	T-STAT	N	60.00	13.48
07/13/94	W	00062535101	TERAZOL 3 SUPPOSITORIES	s	3.00	18.94
07/13/94	W	00062535601	TERAZOL 3 CREAM	s	20.00	18.94
07/13/94	W	00062535001	TERAZOL 7 CREAM	s	45.00	18.94
07/13/94	W	00006336703	TIMOPTIC 0.5% OCUMETER SML	s	5.00	13.88
07/13/94	W	00006336710	TIMOPTIC 0.5% OCUMETER 10ML	s	10.00	26.91
07/13/94	W	00006336712	TIMOPTIC 0.5% OCUMETER 15ML	s	15.00	40.27
07/13/94	W	00065064705	TOBRADEX	s	5.00	16.70
07/13/94	W	00998064305	TOBREX	S	5.00	14.23
07/13/94	W	00039001123	TOPICORT (DESOXIMETASONE) 0.25% EMOL CRE	S	15.00	13.29
07/13/94	W	00072810015	WESTCORT CREAM	s	15.00	10.17
07/13/94	W	00186033001	XYLOCAINE 2% JELLY (LIDOCAINE HCL)	1	30.00	11.15
07/13/94	W	00003045250	CAPOTEN	s	100.00	56.18
07/13/94	W	00003048250	CAPOTEN	2	100.00	96.33
07/13/94	W	00002505818	CECLOR	ន	75.00	22.69
07/13/94	M	00038004010	ELAVIL 10 MG. 100'S	I	100.00	15.20
07/13/94	M	00023791560	ELIMITE	s	60.00	13.37
07/13/94	W	00085056702	ELOCON CREAM 0.1% 45GM TUBE	ន	45.00	21.90
07/13/94	W	00085037001	ELOCON CINTMENT 0.1% 15GM TUBE	8	15.00	11.96
07/13/94	W	00662412066	Glucotrol Tablets (Glipizide) 10 mg	8	100.00	51.11
07/13/94	W	00081024275	LANOXIN TABLETS (DIGOXIN)	s	1000.00	70.78
07/13/94	W	00085092402	LOTRISONE CREAM 45GM TUBE	5	45.00	28.76
07/13/94	M	00006073161	MEVACOR 20MG TABLET 60UU	s	60.00	97.84
07/13/94	M	00585067104	NASALCROM	8	26.00	33.40
07/13/94	W	57706075723	NEPTAZANE METHAZOLAMIDE TABLETS 50MG 100	s	100.00	64.77
07/13/94	W	00071057024	NITROSTAT (NITROGLYCERIN TABLETS USP) SU	N	100.00	5.03
07/13/94	W	00006070520	NOROXIN 400MG TABLET 20UU	s	20.00	40.39
07/13/94	W	00006096358	PEPCID 20MG TABLET 100UU	s	100.00	121.28
07/13/94	W	00006074231	PRILOSEC 20MG CAPSULE 30UU	ន	30.00	90.85
07/13/94	W	11980026021	PROPINE W/C CAP B.I.D.	s	15.00	31.65
07/13/94	W	00009336705	ROGAINE TOPICAL SOLUTION	s	60.00	47.16
07/13/94	W	00310010710	TENORMIN 25 MG 100 TAB BOTTLE	s	100.00	72.32
07/13/94	W	00456045901	ARMOUR THYROID 1GR	N	100.00	7.91
07/13/94	W	00085064902	VANCENASE POCKETHALER 42MCG/ACTUATION 7G	s	7.00	24.43
07/13/94	W	00085073604	VANCERIL INHALER 42MCG/DOSE 16.8GM CANIS	8	16.80	24.43
07/13/94	W	00006071268	VASOTEC 5MG TABLET 100	s	100.00	74.47
07/13/94	W	00028016201	VOLTAREN (DICLOFENAC SODIUM)	s	100.00	77.51
07/13/94	W	00173034409	ZANTAC TABLET 150MG 100'S BOTTLE	s	100.00	135.66
07/13/94	W	00173039340	ZANTAC TABLET 300MG 30'S BOTTLE	s	30.00	73.40
07/13/94		00026884151	NIFEDIPINE CC 30MG BTLE 100 EXTENDED REL	I	100.00	68.69
07/13/94		00039010410		S	100.00	59.45
07/13/94		00597007017	and the second s	s	14.00	16.13
07/13/94		00597008214	ATROVENT (IPRATROPIUM BROMIDE) INHALATION	s	14.00	22.97
07/13/94		00029608522		s	150.00	20.63
07/13/94		00029608027	•	ន	30.00	63.71
07/13/94			CORTISPORIN OPHTHALMIC SUSPENSION (POLYM	I	7,50	13.38
07/13/94		00056016970		S	100.00	42.73
07/13/94		00056017670	COUMADIN	s	100.00	45.95
07/13/94		00039005110		s	100.00	22.18
07/13/94		00071036224		N	100.00	15.38
07/13/94		00071073720	м	s	60.00	53.53
7/13/94	W	00085061304	LOTRIMIN CREAN 1% 45GM TUBE	I	45.00	18.24

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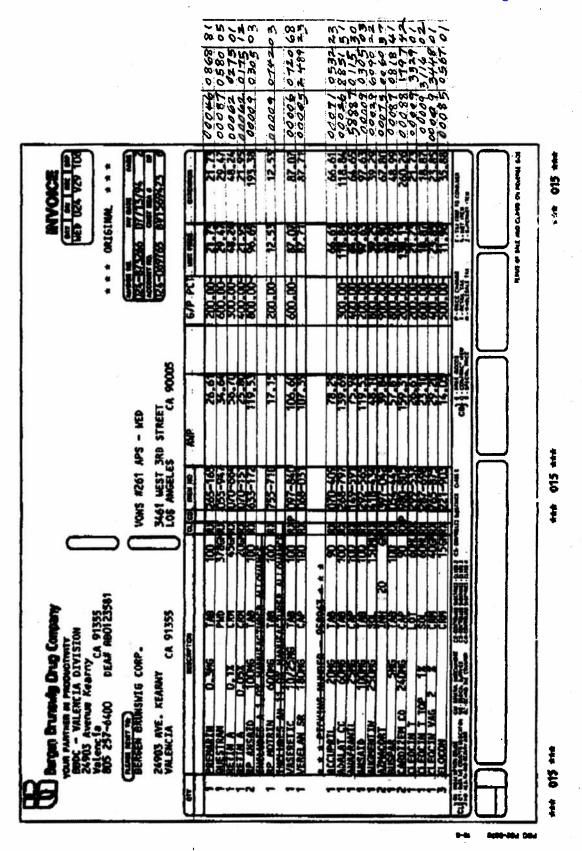
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07/13/9	4 W	00299383528	METROGEL	g	1	s-o+ 28.35	18.97	•
07/13/9	4 W	00071057013	NITROSTAT (NITROGLYCERIN TABLETS USP) SU	H	10	00.00	11.41	
07/13/9	4 W	50458022115	NIZORAL CREAM	s	1	.5.00	10.97	
07/13/9	4 W	00069153066	Norvasc (amlodipine besylate) Tablets 5M	S	10	10.00	92.59	
T	7	-	T		OICE TO		4791.97	/
		-		PHARM	IACY TOT	'AL	4791.97	-

T- Traced to invoice and each I Dnumber late, invoice type, drug name and grantity was correct unless changes. 6-1-95 CSO

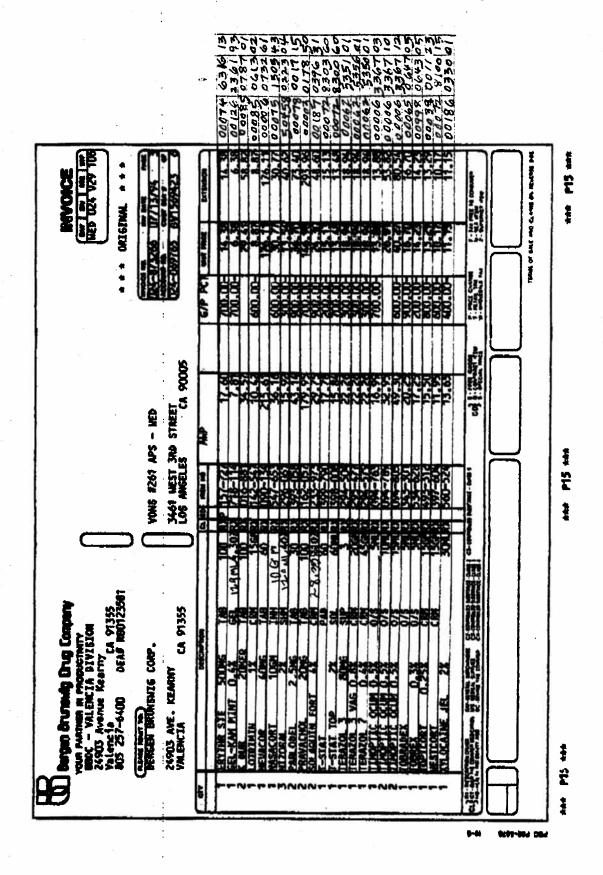
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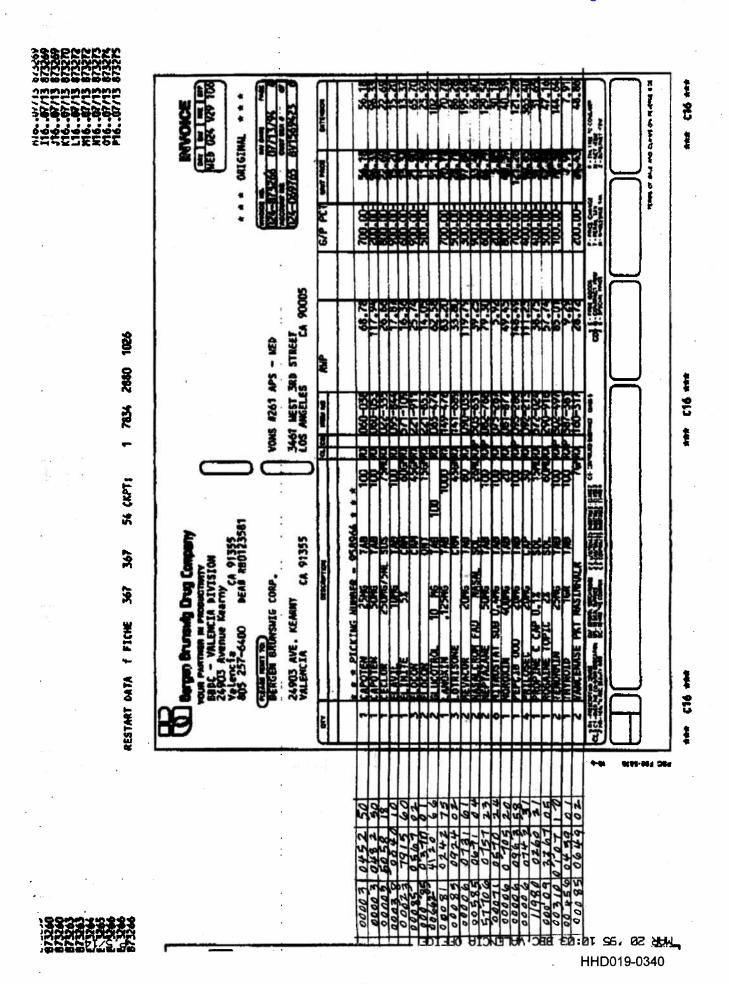
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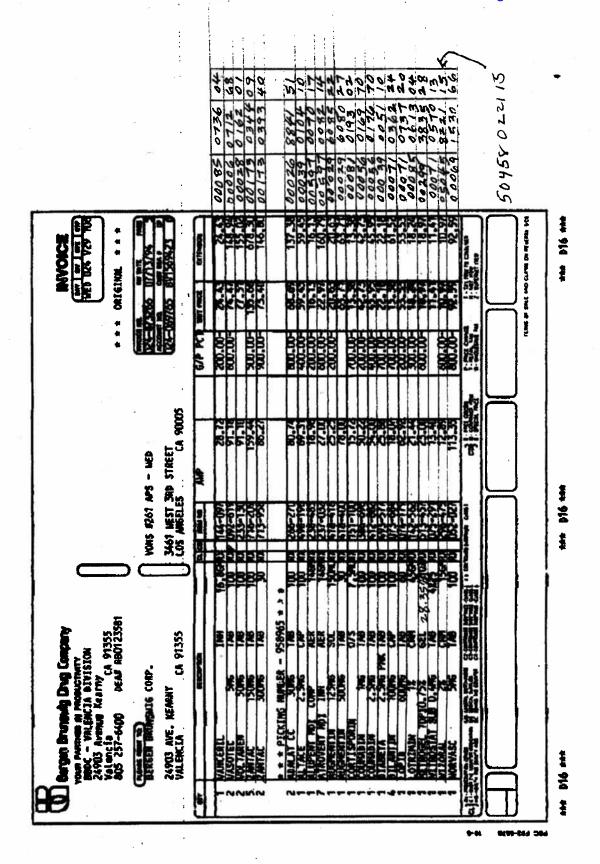
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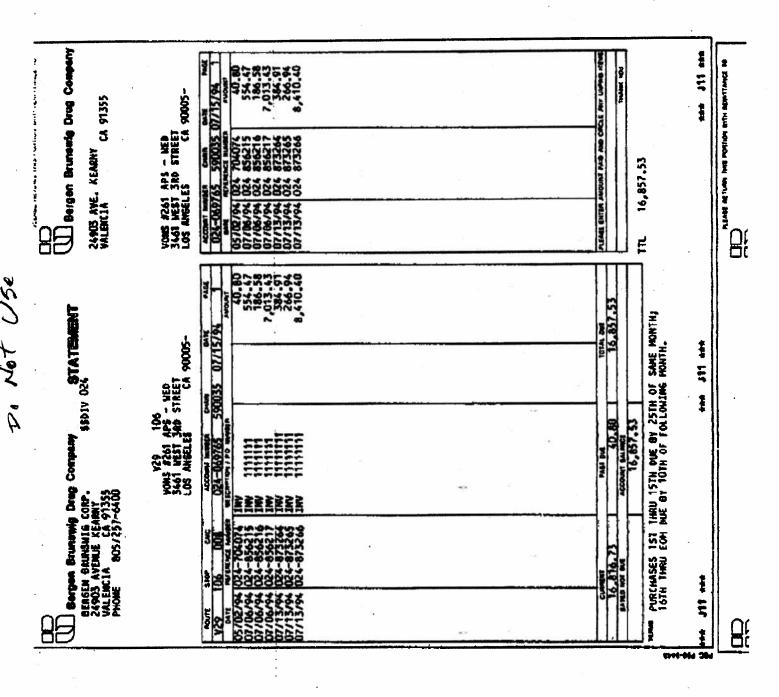


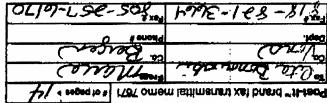
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MAR 20 '95 09:59 BBC VALENCIA OFFICE

	Dhamas Information Com	Confidential
,	Pharmacy Information For	m ·
Pharmacy Name:	VONS PHARMACY #261	
Address:	3461 W. 3rd ST.	
	L.A., CA. 90020	
Phone Number:	818-821-7731	
Contact Person:	ERIC CONGDON, THIRD PARTY A	DMINISTRATOR
	Type of Pharmacy (Check Appropriate Block(s))	
•	endent Retail Pharmacy (four or more stores) Pharmacy er:	
	Nursing Home Pharmacy	
•	Hospital Outpatient Pharmacy	
	Home I.V. Pharmacy Mail Order Pharmacy	
	County Public Health Unit Pharmacy	
	Public Health Entity	

	Pharmacy Information For	Confidential m
Pharmacy Name:	Payless Drugs 4074	
Address:	807 South Main	
	Vceka, CA 96097.	
Phone Number:	916-842-7301	
Contact Person:	GARY W. SAMS	
	Type of Pharmacy (Check Appropriate Block(s))	
Chain	endent Retail Pharmacy (four or more stores) Pharmacy	<u> </u>
	r: Nursing Home Pharmacy Hospital Outpatient Pharmacy Home I.V. Pharmacy Mail Order Pharmacy County Public Health Unit Pharmacy	

Public Health Entity

<b>/</b>										
Television	02/23/94 t	7.	111937 52202 €	щ	TUBERSOL VIAL 5TU-50	TRST	5.81.		#	
	02/23/94	32:	000830004930	Д	ISEBLIE TAB 10EG		100	, c	# F F F F	
-	02/23/94	*	00049277066	Д	CARDURA TAB 4MG		100	100	35.12	
and and	02/23/94	2	00062546012	Д	SPECTALOLE CREAK 18		15GM			
A., option	02/23/94	7	00029282030	<b>A</b>			100	001	20.50	
	02/23/94	*	000068050860	А	RIFADIN CAP 300MG		90	5	110.72	
CA-RC-11 02/	02/23/94	*	00378005201		PIMBOLOL TAB SEG	RYLH		001	09 75	
CA-RC-11 02/	02/23/94	*	00536336701	U	CAP 10MG		100	001	9 4	
	02/23/94	7	00074361101		INC PONDER	PACKETS	8	0 6	10.46	
CA-RC-11 02/	02/23/94	<b>7</b>	00998030305	А			5 M.L.	) <i>u</i>	9 0	
ra e	02/23/94	<b>3</b>	•	U		RUG	3208	, c	19.01	
CA-RC-11 02/	02/23/94 [	2	0008532030	í A	MITEO-DUR SYS 0.4EG/KR	'KB	<b>&gt;</b>	30	35.51	415.73
CA-RC-11 02/	02/21/944	ە ئە	395060011254	m m	BLDEPRYL TAB 5MG	NOS	. 09	<b>4</b> 2	113 83 €	
	02/21/94	v	49884029001	 ט		pc	1001	1001	20.50	
	02/21/94	U	000081059755	Α.	INURAN TAB 50MG		100	001	64.00	
9 14 64	02/21/94	U	00310060060	A	HOLVADEX TAB 10MG		09	2 50	32.65	
w 5 6	02/21/94	Ü	00046073981	A	LODING CAP 300MG		100		88.35	
gare.e.	02/21/94	ပ	00074258913 1		BRYTHR BTH TAB 400MG	ABB	100	100	10.55	
٠دى	02/21/94	Ü	00074338913 1	Д	PCE TAB SOOMG	- •	100	100	120.36	
	02/21/94	Ü	00029600823		AROXIL BUSP 125EG	10	100ML	100	1.00	
,	02/21/94	U	57267091526	Д	TRAMSDERE-WITRO 0.6EG/KR	IG/XR	30	Ö	68,83	
	02/21/94	U	00378011505	., G	AMPICIL CAP 250MG	MAIL 5	5008	500	19.80	
	02/21/94	U	00046086881	Д	PREMARIN TAB 0.3MG		100	100	22.41	
	02/21/94	ပ ပ	00689011901	Д	LEVOXINE 15 MCG DP	011901	100	100	4.32	
	02/21/94	ບ	00074632013   1	m,	BRY-TAB 333MG B/C	-	100	100	12.40	
غد الام	02/21/94	 U	4# <b></b> .	e A	CECLOR O/S 375MG	รั	SOME	30	23,39	
. Bre At	02/21/94	Ű	00085045803	, A	CLARITIN TAB 10MG		100	100	155,46	
,	02/21/94	ပ	00087081841 7	Д	BUSPAR TAB SEG		100	100	48.56	
	02/21/94	U	00332312509		DICLOMAC CAP SOOMG B	BIO	100	100	15,50	
. منود	02/21/94	e.	1701	m m	LEVOXINE 25ECG DP	011701	100	100	3.46	
	02/21/94	U	3742	Д	CARDEME CAP 20MC		100	100	34.37	
	02/21/94	ပ	00168007038	 G		FOUG 17	1/801	3.5	1.85 8.85	
CA-RC-11- 02/	02/21/94	<ر			WADOLOL BUNG APOTH 24	24631	100	100 15		
0	2/21/94 #	ن د	00002314530 1	e e	AXID PULY 300MG		30	30	73.48	

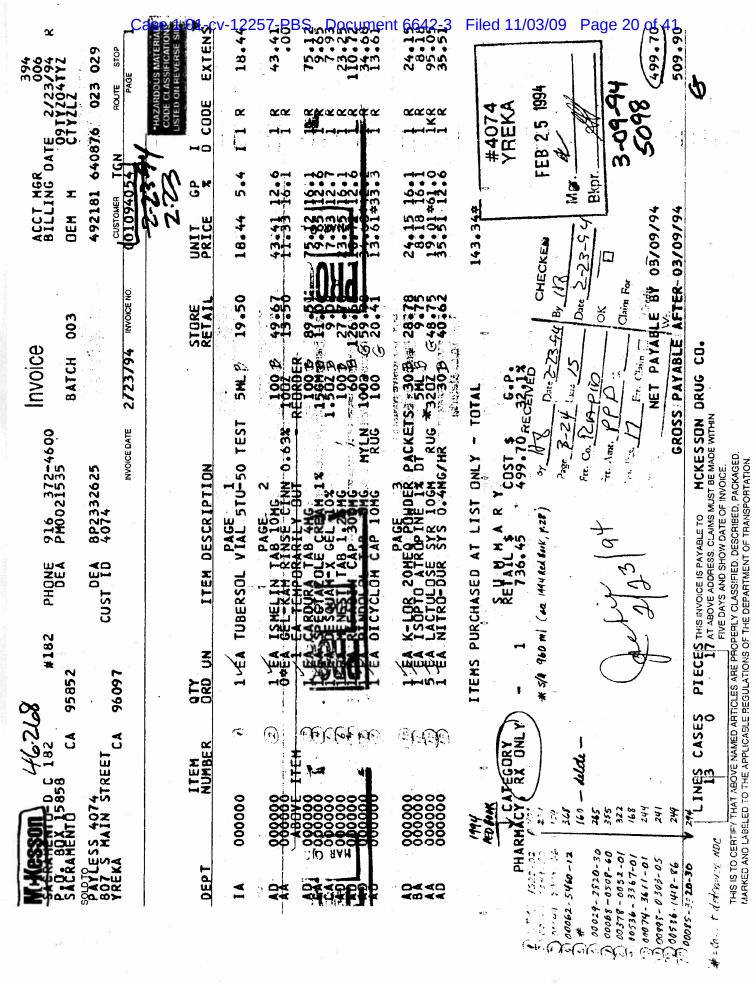
	TOTAL																						4	e k												
	PRICE	2.10 £	45.42	22.00	93.66	7.04	60.0	82.55	33,11	5, 19	6.60	15.85	34.48	17.50	20.80	25.19	20.00	8.00	0.0	90	34.31	34.97	23,28	253.06	18.25	101.68	63.91	68.56	1.94	84.32	25, 19	1.90	409-13	44.63	345.66	142.00
	QTY	100 4		100	30	200	100	100	56	100	1001	100	120 2	10001	100	16.8	20	100	. ?‰ ⊌n ₩	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	in in	500	10	03	200	30	100	100	100	100	r.	000	1000	100	1001	100
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		100	100 ML	100	30	SOOKL	100	.100	26EL	100	1008	100	X60RL	1 1 X 6	100	16.8GM	SORL	100	15GH	SOML	4 5G R	EU	24	20	5001	30	100	100	01	100	10E	30GK	1000	100	100	100
	TION	SCXB	•	SCHE	י ח/ח		BIO		DECT	A RC	RYLK		ROWELL 7X50KL	250MG APO IM			. 7	BIO		0.2534		12005	3ML		TON				153501		MASAI	POUG				
	DESCRIPTION	3 5 <b>I</b> I G	74		2010	LIQ CI	DE .		BOL	TAB 0.	5 / 50	) IKG		P 2501		CHERL	[G / 5 M]		85	top 0.	0.054	TAB	083	**	SOME	110	0 KG	נפ מם	60 66		ALBR		EG	MG	2	
	DI	L TB 2	0/S 375MG	P 2018(	S CAI	ORAL	1P 250	1016	KASAL	SUBL	I TAB	AP 100	BNBRA	KY CA	10 KG	RSAL 1	3 2001	CAP 250MG	M 0.0	IR DE	KERM (	100KG	SOL O.	400M	TAB 3	FCH 3	TAB 10	18 101	RIMB	1026	OCKTN	LIAR	CAB 52	CAP 2.5MG	CAP 40MG	50MG
		BETRANECHOL TB 25MG		NIFEDIP CAP 20MG	DEPOT PRILOS CAP 20MG	PNOS-FLUR ORAL LIQ CHERY	CBPKALMX CAP 250MG	BUSPAR TAB 10KG	HASALCROM HASAL SOL 40MG	HITROSTAT SUBL TAB 0.4MC	BELLOR+ECT: TAB 5/50 MYLN	DILANTIN KAP 100MG	CORTEMBER BREEK	THTRACY/SURY CAP	BENTYL CAP 10MG	BECOMASE MASAL INHALER	LORABID O/S 200MG/SML		ACLOVATE CRE 0.05%	POLY-VI-FL+IR DROP	TEROVATE CREAK 0.05*	DOXYCYCLNE 100MG TAB	PROVENTIL SOL 0.0838	SUPRAX TAR 400MG	CARISOPROD TAB 350MG	HABITROL PATCH 21MG	LOPRESOR TAB 100KG	PRINIVIL TAB 10X4 UU	PSEUDOEPHEDRINE 60 GG	VISKEN TAB 10MG	VANCENASE POCKTRALER MASAL	HYSTATIM+TRIAE CRE	MICROMASE TAB SEG			R CAP
		BETKA:	CECLOR	NIFED	DEPOT	PX08-1	CBPKA	BUSPA	HASAL	HITRO	AETLO:	DILAN	CORTE	THER	BENTY	BECOM	LORAB	DICTOXEC	ACLOVI	POLY-1	TEROV	DOXYCY	PROVE	SUPEA	CARIS	KABITI	LOPRE	PRINI	PBBUDO	VISKB	VANCE	HYSTA	RICRO	DYBACIRC	ACCUTAND	PARBLOR
Ŀ	B/C	<b>u</b>	m	g.	Pi)	Д	<sub>G</sub>	Д	А	Д	U	щ	m m		Д	A	A	u	A	<b>A</b>	A		A	<b>A</b>	ָ פ	Д	Да	Д		<b>A</b>	Д		Д	Д	Д	Д.
		0014	13248	37701	74231	12946	14509	81941	67 104	57024	57701	36224	90482	65560	12061	33602	13687	12309	40100	48341	37 50 1	12005	901	89718	11005	92028	07 10 1	10658	53501	02308	64902	08130	17 107	22605	-	07805
	MDC	00364041001	00002513	00364237	0000000	00126012	00332314	00087081	00585067	0007 1057		0007 1036	00032190	03065			02513			00087048	73037	53489012	0008203001	05389	89011	81083	28007	06010		18007	95064	80089	39017			
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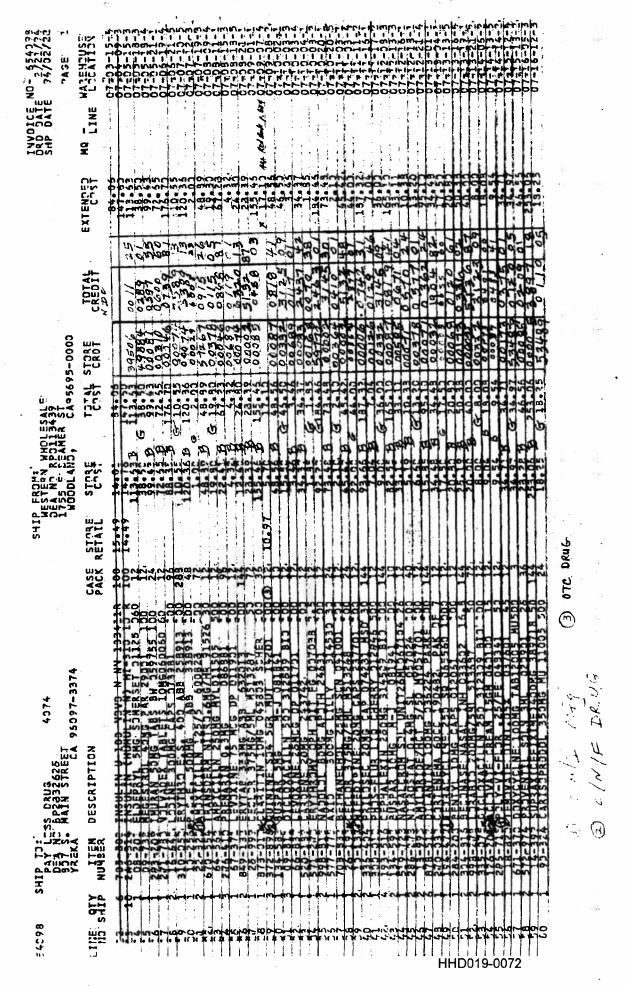
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	DESCRIPTION	DEPOT BIRXIN TAB 500MG 60	VOLTAREN OPHT SOL SEL ;	DESOGRA TAB 6X28	WASALIDE SOL 0.025% PURP 25EL	VI-DAYLIN/F ADC DROP 50ML	TIROPTIC O/S .5% OCURRY 10HL	PREMRKIN TAB 0.9MC 100	12701 NU	SAMTAC TAB 300MG 30	TIGAN SUPP 200MG 10	INITERN S/DOSE SYST PREF SYR 2	IMPRABINE 10MG MUT 33001 100	BSGIC-PLUS TAB 100	SEPTRA SUSP CHERRY 473EL	CEPKALEX CAP 500EG BIO 100	KYDRAL TAB 10MG MUT 100	SUPRAN O/8 100MG/SEL SOML	MAPROXBH TAB 37 SEG MYL 1000	AMSAID TAB 100MG 100	PERIDEX ORRE RINSE * 3X 16011	DEPOT EBYACOR TAB 20MG 60	AMONIL CAP 250EG 500	AMOXIL SUSP 125MG 150ML	PROVERA TAB 2.5MG 100	DEPOT VENTOLIN INNALER 17GH	BECOMASE AQ SPRAY 0.042% ZSKL	PREERRIN TAB 0.625EG 100	ALBUTEROL IMMAL SOL BEL 15008 25	ORTHO HOUUE 1/1/1 DIALPAR 6X28	MICROMASM TAB SMG 100	DEPOT SANTAC TAB 150EG 100	INTAL WEBULISER AMP 2ML 120	AMOXIL CAP 500MG 500	PREERRIN TAB 1.25EG 100	SULFATRIM PED SUSP B/N 16018 V
Ê	B/6	Ф	<b>P</b>	æ	щ	Д	Æ	Д	u	<b>P</b>	Д	A	G.	æ	A	ט	ט	Д	v	A	æ	А	co.	u	A	æ	А	А		А	<b>A</b>	Д	æ	G	Д	<sub>o</sub>
ger.	ирс	00074258660 t	\$8768010005	00052026106	00033290640	00074110650	000006336710	00046086481	53489012701	00173039340	00029408438	00173044903	53489033001	00456067801	00081085596	00332314709	53489012301	000002388840	00378055501	000000000000	37000000000	000000013161	00029600632	00029600822	000000000000000000000000000000000000000	00173032188	00173036879	00046086781	59930150008	00062178115	000000017105	00173034409	00585067303	00732	. 00046086681	00472128516
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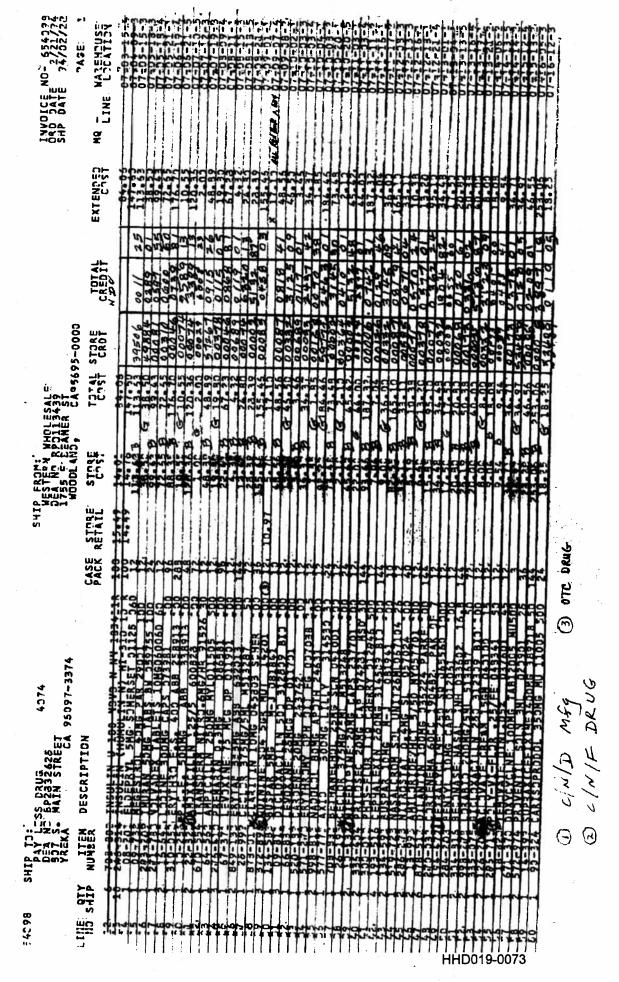
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	27112			2/0	DESCRIPTION		QTY.	PRICE	TOTAL
CA-RC-11T	02/21/94 t		ct 0008 506 1402 t	æ	PROVENTIL INKALER 17 GE	+	13 +	10.25	
CA-RC-11	02/21/94	U	00075150543	Д	KALBR	<b>.</b>	1 01	31.32	
CB-RC-11	02/21/94	U	59930151504	ı	L 15154	20	30	9.35	
CA-RC-11	02/21/94	ပ	00046087293	Д	15			25.69	
CA-RC-11	02/21/94	v	00029600922	c c	AMONIL SUSP 250MG 150ML		150	1.83	
CA-RC-11	02/21/94	υ	00021440305	<b>A</b>	COLYTE SOL FLAVORED 4-LITER			13.77	
CA-RC-11	02/21/94	υ	50111045601	U	OXYBUTYNIN TAB SMG SID 1008	vi en	100	12.05	
CA-RC-11	02/21/94	U	000000072068	Д	VASBRETIC TAB 10-25 100		100	86.82	
CA-RC-11	02/21/94	Ü	00003017850	<b>A</b>	PRAVACKOL TAB 20MG 100	A	100	165.71	
CA-RC-11	02/21/94	Ü	00021462010	А	PROCTOCRESM-NC 18 102	まシル*		14.07	
CA-RC-11	02/21/94	ပ	00026851351	æ	DEPOT CIPRO TAB 500MG 100	•	100	265,22	
CA-RC-11	02/21/94	Ü	00378014701	O	HYLW :	·	100	# F	
CA-RC-11	02/21/94	Ü	00025100131	m m		×: <b>+</b>	100	32.00	
CA-RC-11	02/21/94	U	00025191131	æ	CALAN SR CAPL 180MG 100		100 %	00.60	
CA-RC-11	02/21/94	U	00781151001	<sub>G</sub>	GBH		100	6,23	
CA-RC-11	02/21/94	ပ	00008253602	æ	RBFILLS 6		188	16.91	
CA-RC-11	02/21/94	ပ	00378023201	ט	HYL		1004	40.60	
CA-RC-11	02/21/94	U	00025189131	Д	9110		100	109.06	
CA-RC-11	02/21/94	O	00173038742	æ	200	1	, C	153.34	
CA-RC-11	02/21/94	ပ	00332417736	U	UEX O/S 250HG BTO 2001		200	60	
CA-RC-11	02/21/94	ပ		Д	CAP 200MG	7 Vand 40		41.6	
CA-RC-11	02/21/94	ບ	00998008015	<b>1</b>		-	3 4	# 6 F	
CA-RC-11	02/21/94	٤	0008810642	, p			n idea File (	N	
CA-RC-11	02/21/94	· c	00412132016	) L	Old tongs and		) )		
C 2- BC - 11	02 121 704	, ,	200000000000000000000000000000000000000	2 F	THE PERSON	<del>~~</del>	Comm.	14.75	
	*********	,	CONTRACON	<b>P</b> 1	D TAB U. IMG 10	<b>1</b>	1000	152.47	
	04/41/94	د		<b>P</b>	CARDINER CD CAP 120MG 90	····	(A)	75.00 3	
CA-RC-11	02/21/94	Ü	00472077116	<sub>O</sub>	KYDROXYI SYRP 10KG B/N 16018		16	6.00	
CA-RC-11	02/21/94	ပ	00081099155	ф	SOVIRAX CAP 200MG 100		100	82.35	
CA-RC-11	02/21/94	U	11980026020	Д	PROPINIS C CAP OPE SOL . 18 10ML		10 4	22,16	
CA-RC-11	02/21/94	ບ	50732090101	U	VERAPAR BR TAB 240EC X/H 1008		100	75.00	
CA-RC-11	02/21/94	U	00781143101	v	PROPRAM+HCTS TAB 40MG GBM 100		100	5.41	
CA-RC-11	02/21/94	<b></b>	11990018015	щ	PRED FORTE OPNTH SUSP 1* 15ML	**************************************	10	27.45	
CA-RC-11	02/21/94	ပ	00062542901	Д	MONISTRY DUAL-PAR+APPLIC [BACK]			22,16	
CA-RC-11 1	, 02/21/94	ت •	00004624013	Д			100	70.87	
CA-RC-11 }	02/21/94	ပ	00008069001	<b>(C)</b>	OMG	<b>-&gt;</b>	100	168.42	
					1	<b>&gt;</b>	) )	, p	

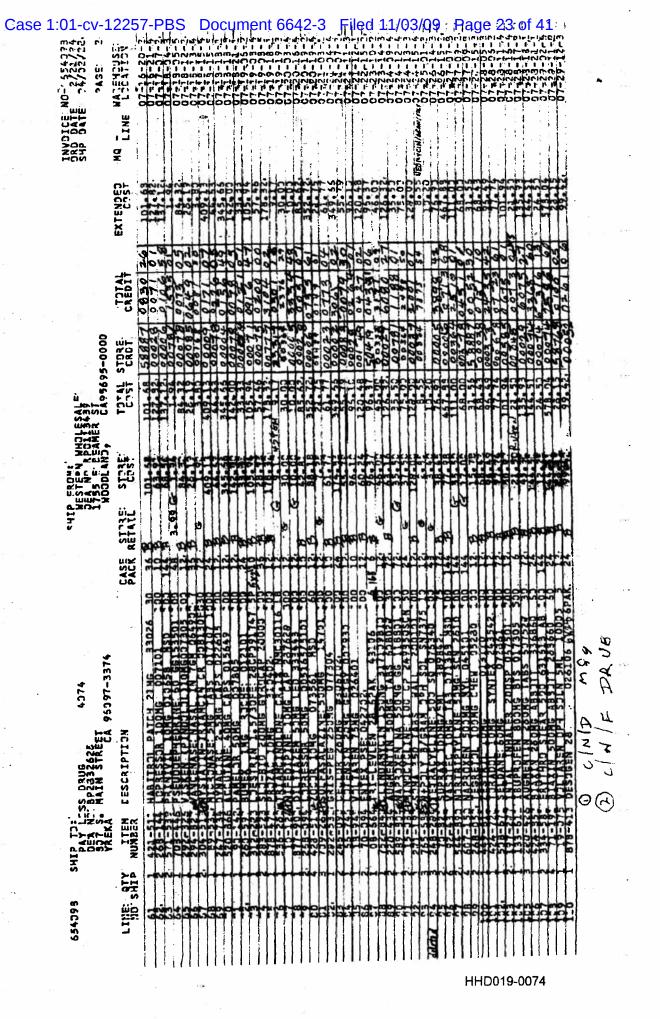
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79000 - 1	ronnn .	ronnn .	7.202		FLOXIN 400EG TABS 154202		50 *	50 4	153.53	
67000	67000	67000	<u> </u>	<b>-</b>	KBRLOMB TAB 10AG			100	60.85	
, c				, p	CHIESCHIME DIES ESE CO	٠.		1000	23.37	
· U		00781118701			KOLFANELOIM DOKA-IND SZEGE HAPROXBE SOD 275EG SDV	oot a	944°	100	0.00	
02/21/94 C 00006094268	C 00006094268	00006094268		æ	CLINORIL TAB 200MG	100		100	2 6	•
02/21/94 C 00781302070	c 00781302070	00781302070		o,	CYANOCOB VL INECG GBN	10 ML	ر به: حري	101	1.05	
02/21/94 C 00781271510	C 00781271510	00781271510		C.	TRIAM+HCTS CP 50/25 RD G1	GRH 1R\$		1000	00.00	
U I	C 00062016501	00062016501		æ	RETIM-A CREAK 0,025%	20GK	. , "	70	21.84	
05 (000) 2	C 00075070000	0000 2010000		A	LOFOL TAB 1.25MG	100	***	100	50.80	
C 00378	C 00378075101	00378075101	_	"		100		100	18.00	
767000 0	C : 00049411066 1	00049411066 7	_	m	KOL	100		100	28.30	
C 007811	C 00781169510 G	00781169510 G	G		ISOSOR OR TR 20MG GRM	1000	,,	1000	7.94	
C 001095	C 00108501320 B	00108501320 B	A		TAGARRY TAB 300MG	100		100	71.04	
269000 3			æ		PROCARDIA XL B/R TAB 60RG	2 100		100	170.39	
C 003780			G		PENICIL-V TAB 500 OV MYLE	I IN		1000	35.00	
060000 2			Д		DRLTASONE TAB SEG	200	fever	200	4.74	
060000 0			m		DELTASONE TAB 10MG	200	April 11	200	8.88	
C 000810	0000810		<b>P</b>		IOVIRAN OIMT 54	361		'n	13.03	
; C 007811	007811	00781107801   G	U		ATENOL TAB 25EG GBM	100	turne ne	100	8.86	
C 000625			Ф		MONISTAT-DERM CRM	103	*	*30 GM 1 ;	17.96	
C 000810	0000810		<b>A</b>		QUESTRAN PWD 46R PKT	90	<b>*</b> ***	9	66.71.	
C 000625	000625		P	:>	TERRIOL 3 VAC CRE 0.88	20CH		50	19.53	
υ 	007811		IJ		ARITRIPTYLINE 10 GG 143601		1001	100	1.25	
C 007811			C)	,	TAB	100		100	1.85	
C 1 000013			Ф		CYTOKEL TAB 25ECG	100	الماملة ا	100	13.56	
C 000810	C 00081019302 B	00081019302 B	æ		CORPISPORIN OPHY SUSP	7. SEL	timed.	# 2 C	13.79	
#65000 D	85120	85120	Д		RELAFBN TAB 500MG	100	. \$4	100	82.36	-
e e	05002	05002	Д		PROVERA TAB 10EG	100		100	53,37	
<b>U</b>	C 00781190201 G	00781190201 6	G		QUINID SUL TAB 300MG GEN	100	ه می د چه	100	10, 53	
02/21/94 . C 00108502618 B	C 00108502618 B	00108502618 B	m		TAGARET TAB 400EG	9	p +,4	.09	71.45	
U	C 00039005110 B	00039005110 B	Д		DIABBUA TAB 2.5EG	100		100	22.86	
ບ ບ 	C 00005316031 C	00005316031 6	U		GERFIER TAB 600MG LED	5008		2009	266.67	
, C . 00048104605 ,	20010	20010	P		SYMPKROID TAB 0.05KG	1000	>	1000	132.68,	
02/21/94   C   00068072261   B	72261 V	72261 V	д		SKLDAME-D BR TAB	100		100 🗸	87.63	

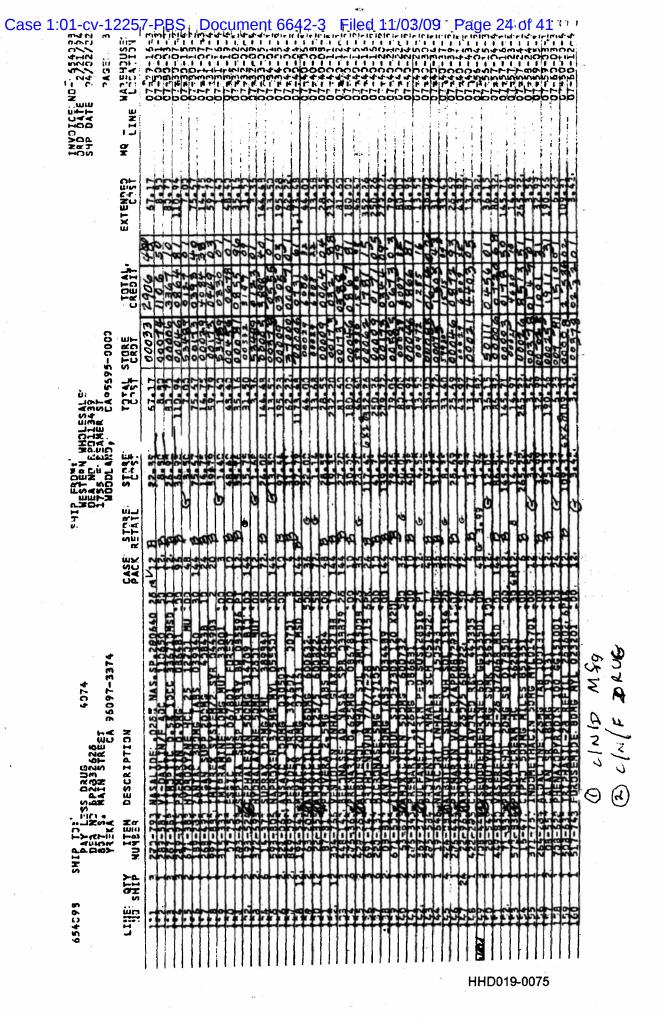
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TE CYCLE I.	TOTAL					à			•			•		-																			`	12859.65 /		•	K 4/24/85		13275.38	
# C+ 00	FRICE	37.68	34.15	63.33	2.50	145.58	12.45	100.12	2.31	153.48	14.25	* 85	551.13	23.68	135.53	49.05	84.08	57.74	13.25	17.25	20.00	70.43	18.49	30.00	93.54	129.47	4.85	25.53	16.94	64.28	 	17.00	27.23	83.39	. 7	ancom	date fell. Will	1	`	
5	X I Z	1000	30	30	16	20	100	100	100	100	100	100	1000	7		100	100 5	100	100	100	100	100	1000	1000	100	100	100	100	100	100	16	200	<b>2008</b>	100		all course formions	made to di			
		100 1	30 ML	30	160%	20	1001	100	100	100	1008	100	1000	14GM 0	20	100	100	100	100	100	1001	100	1000	1000	100	100	1008	100	100	100	16058	5000	EXECT .	100		MOVE	R	•		
#Order do	DESCRIPTION		SOL 58		HALS		SCHB	4	BOME GBM		MYL	IB SCKB		ABRO COMPL	9				KG GBM	G 1874	7.5/750 WAT 1	MG T540	G 141010	LERN	3.75%G		MAL	TAB		TAB 1.0EG RX PR	B/M 1	5/5C WAT :				•	WE 4/26/05		-	
, and a second	DES	PAMBLOR CAP 10MG	ALUPBIT INNALANT	TACARIST TAB 800RG	PROESTRAS VC SYRP	PLOXIM TAB 300MG	PRIMIDONE TAB 250MG	AMAPROX TAB 550EG	PROPRANCIOL TAB 80MG	PAXIL TAB 20MG	PENOPORF TAB SCHE	BUTAL+APAP+CAF TAB	DEPOT CAPOTEM TAB 25EG	ATROVBUT INKL AE	DURICEF CAP SOOMS	RU-TUSS T/R TAB	CORGARD TAB 40EG	SYMALGOS-DC CAP	RLPRAIOL TAB 0.5MG	ALPRASOL TAB 1MG	KYDROC+AP TB 7.5/	PALNIN NX TAB SORG	REPROBARAT 400 GG	ACBTAK+COD TB #3	TRANXBUB T-TAB 3	AMBIEN TAB 10NG	CLORAIBP TAB 15EG	TYLEMOL+COD #3 TA	PROSOM TAB 2MG	KLONOPIN TAB 1.0]	HYDROMBT SYRP	HYDROCOD+AP TB 5.	PROPOX+AP TAB 1C/650 PR	PIORIMAL+COD CAP				J	1 1 2 2	•
	9 / 8	tb P	<b>A</b>	A	e.	A	р. 19	Æ.	<u>д</u> ,	д	9	<b>D</b>	A	Æ,	Д	<b>д</b>	r r	S A	9	9		PA	E	e e	A	A	O O	A	Д	A	A	<b>5</b>		E E		:	Annual Control			•
ş	RDC	00078008605	00597007130	00108502713	00879051416	00062154102	00364036601	18393027642	00781138401	00029321120	00378047101	00364229701	000000045275	00597008214	000007078446	00048005801	000003020750	000008419101	00781132701	10026118100	52544038701	00024195104	00781141010	00003015010	00004438913	00025542131	00378007001	00045051360	00074373613	00004005801	00472103016	52544034905	00378015505	00078010705	Thosed to curlage		ester: Co	l exteriotion		
TYPE	TMC.	40	0	v	0	υ	Ü	Ü		Ü		υ			¥. 19 449.7	U	 U	U	 U	 U	U	Ü	U	U		U	U	Ü	U	 U	Ü	υ 		D C	Thuck	7		renfeed	( ) ( ) ( ) ( ) ( ) ( )	
e e	DATE	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	£ +	( 1)	1.1	C = >	> >	
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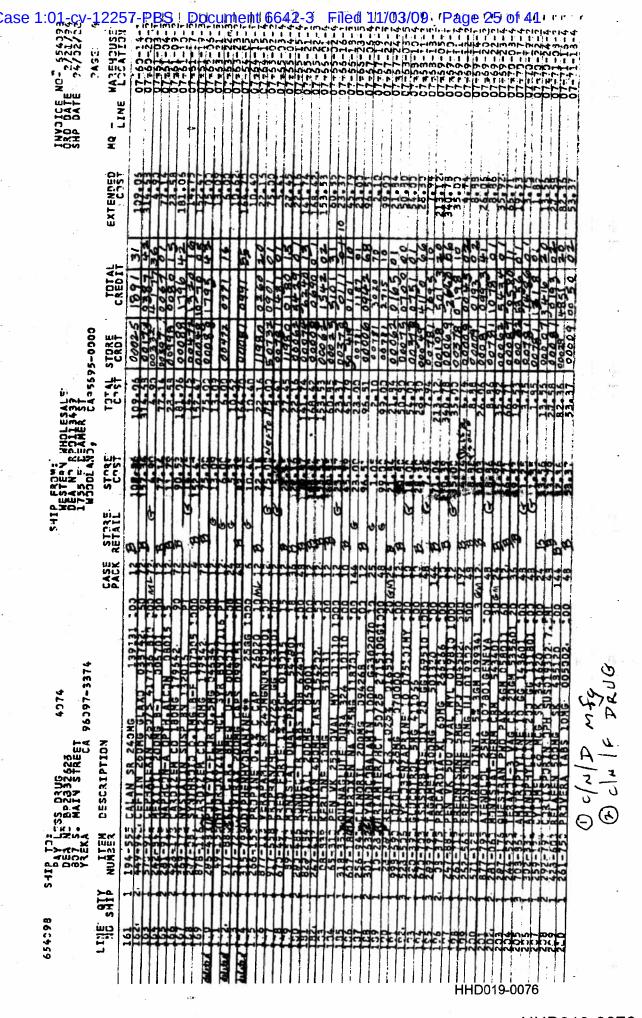






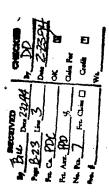








INTOICE NO- 854299 ORD DATE 2/21/94 STE DATE 2/22/94	T CO WA		TECO TECOD	28,418,89 10101		TIVIZE & EECO
001333413 01133439	AMER ST CAL 95695	CIAIS ****	~	F. 28 CEEDIT TOTAL	AEM CIST-	RETAIL DEPT
SHIP FROM: WESFERN YROLESALE DEA NO APOLLEGACE		**** PICEPTIONS AND TOTALS	PTION	5602 20,417,78°7221	AS EILIEDE FE	COST 🛊
4.674	RITI CA 95097-327	14 特殊事件公	ITEM DESCRIPTION	PUBCE, MAR 5002 SUFFLIES 7221	CHICA RECRIVED	RETAIL DEPT 296.71
SHIF IV: PAY LESS DRUG - 4074 DEA NO EP2532625	HEERA S. MAIN ST.	•	LINE CTY OTY NO GAD SSIP	ACCTS CEARGED	**ALL CONTROLLED DRUGS RECEIVED AS ELLIED: FERSHSCIST-	LEPT COST \$ 98 20,417,36 \$



TOTAL						,	711.55										356.61										-								
PRICE	36.36	39.44	86.98	229,50	58.93	65.83	172.49	9.30 %	1.50	32,79	17.99	20.99	00.0	14.99	199.99	15.00	32,994	•	10.29 4	228.09	4.86	138.41	3.83	7.08	30.22	3.39	7	51.57	39.80	19.89	18.93	134.86	20.55	17.45	145
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DESCRIPTION	TIEGRAIC 0/S .5% OCURET 10KLA	O/S . 5% OCUMENT 15EL	CAP 20MG U/U	PEPCID TAB 40EG U/U 100	MEVACOR TAB 10EG U/U 60	DEPOT EBVACOR TAB 20EG 60	EEVACOR TAB 40RG U∤U 60 ¥	TRASODOME MCL 1903G PUREPAC 100		VERAPAR TAB 120KG WKT WAT 500	PARTUSS-LA TAB BETEK LA SIDEAR 500	FURCSBRIDE SOME TAB WATSON 500	FUROSEMINE 40EG TAB WATSON 1000	DIPERMYDRAEIN SORG PURBPA 1000	GREFIBE TAB 600EC W/C 5008	HALOP TAB 5 RG PAR 10008	APAP W/CODEINE 1/2GE PURERA 1000 🔰		BRYTHR BTH 0/8 200EG G/L 1608 &	ORTHO MOVUE 1/1/1 REFILL 12X28	TEM-R C/R TAB 750MG 100	SLOW-R TAB 600MG 1000	METOCLOPE TAB 10MG P/P 5000	EEDROXYPR TAB 10KG URL 1008	POLARAMINE TAB 2MG 100	BETARET VAL CRE . 18 G/L 45GE	GLYBURIDE TAB 2.5MG G/L 100	ATEMOL+CKL TAB 50/25 RUG 100	THEOPHY SR TAB 200MG RUG 500	PREDMISON TAB 20MG SCHE 500%	PROVENTIL INHALER 17GH	DEPOT SANTAC TAB 150MG 100	SYMTHROID TAB 0.125MG 100	PROVENTIL INTALER REF 17GH W	A according to land Cheese, this date will not to work; do not weify.
E INV. NDC B/G	194 t a t 0000633671000B		/94 K 00006674231 B	/94 K 00006096458 B	794 R 00006073061 B	T 00000000	794 W 00006073261 B	194 t at 00349890701 t c	76867600 2 5	794 G 52544034505 G	/94 G 00349893105 G	ø	/94 G 00349233710 G	/94 G 00349887210 G	794 6 00047008430 6	/94 G 49884022610 G	/94 V G V 00349886110 V G	7	7 W 00192137	W 00062178	*	794 W 57267016540 B		*	/94 W 00085082003 B	794 W 00182161060 G	9	<b>₽</b>	794 W 00536465105 G	;- <b>2</b>	<b>&gt;</b>	2	*	/94 V W 00085061403 FB	'Ind Cheson, this dith
ID DATE	CA-UI-1 T 07/01/94	CA-UI-7   07/01/94	CA-UI-7 07/01/94	CA-UI-7 07/01/94	CA-UI-7 07/01/94	CA-UI-7 07/01/94	CA-UI-7 07/01/94	CA-UI-7 07/11/94	CA-UI-7 07/11/94	CA-UI-7 07/11/94		CA-UI-7 07/11/94	CA-UI-7 07/11/94	CA-UI-7 07/11/94		CA-UI-7 07/11/94	CA-UI-7 07/11/94				-=		X 841		CA-UI-? 07/01/94	. 444	Na w	eTit wag	CA-UI-7 07/01/94	-644	l was s	- Carreston	>	CA-UI-7 ₹ 07/01/94	of decording to

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DESCRIPTION	ACORT INTALER	300 EC	OVENT INKL ABRO COMPL	EDA CORP 15EG/KL	TAB 0.25EC	S CRM	BB 60MG	DEPOT LOTRISONE CRE	PREMARIN TAB 0.625EG	CREAK 28 JAKS	SB 15EG	SYS O.4RG/XR	DYALIDS CAP 25/37.5EG	NYOSOPHEN TB 16.2MG RUG	-125 SUSP	VAG CR RBF .625	TRIPLE SUL VAS CRE NEC	ORTHO MOVUE 1/1/1 DIALPAR	TAB SEG SOE	: 2016	TAB 1GE	CD CAP 240MG	TAB 2.5MG	TAB 200MG	DISPERTAB 333AG	TAB 50MG	-5CC 29X 5 BD328	IMS BD 29-100 328411		-E#8-BB-29-100 328411-						
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	* IF YOU HAVE ANY QUESTIO * PLEASE CONTACT OUR CUST * SERVICE DPT AT 800-422-	NS *	10	~
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9 31 EA	SECON-K TABLEGOOMG METUCLOPR TAB LONG P/P	1000B 161.32 500B 6 78.05	7.86 63.1 138241 14.2 3.83+95.1	1 R 138.41 1 R 7.66
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I B Z EA	POLARAHINE TAB 2MG BETAMET VAL CRH .1% G/L	100B 35.21 45GM G 7.50	-30.22 14.2 3.39 54.8	1 R 30.22 - 1 R 5.78
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CAC I EA J	SLYBURIDE TAB 2.5MG (A) G/L ATENDL+CHL& TAB 50/25 RUG THEODHY SE TAB 200MG PUG	100 @ 82.40	13.03.35.1 51.57*37.4 39.80*51.3	1 R 18.03 1KR 51.57 1KR 39.80
TO I EA I	THEOPHY SR TAB 200HG RUG PREDNISON TAB 20HG SCHE	500 & 81.75 5003 & 31.80	19789+37.5	1 R 19.89
A EA E	PAGE 4 PROVENTIL INFALER PANTACOTAB 150MG	17GMB 22.06	18493_14.2	1 R 113.58
MONS EN 1	ZANTĄCĘTAB 150MG Burranskas karnies MCKESSON	100 <b>9</b> 159.44	134.86#15.4	1KR 404.58 CONTINUED
•	A series of the	ORUG CO.	***	CUNTINGED
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<b>(4)</b>	CINIF MFR		*	
		Invoice	ACCT HGR:	112 015
#3936 #147	PHONE: (714) 772-6060 DEA: PF0000012	i.	BILLING DAT	E: 7/01/94 R 09SZZ01SZZ
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			14	*HAZARDOUS MATERIALS CODE CLASSIFICATIONS

LISTED ON REVERSE SIDE

	Case 1:01-cv-12257-PBS	Docume	nt 6642-3					
#3936 #147 92803	PHONE: (714) 772-6060 DEA: PF0000012		: 007	ACC BIL DEM	T MGR: Ling D	047E: 7/0 09SZZ0 CVUZCV	112 015 1/94 R 1522	
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UTY HED UN	ITEM DESCRIPTION		STURE RETAIL	UNIT	GP	D CODE	EXTENS#	<u> </u>
PE EA SY	NTHROID TAB 0.125MG	1003						
EAA AZA	NTHRDID TAB 0.125MG DVENTIL INHALER REF MACORT INHALER NTAC TAB 300MG ROVENT INHL AERO COMPL JPENT MDI COMP 15MG/MLO NOXIN TAB 0.25MG	20GHB 30B 14GMB 10MLB 1000B	24.94 20.33 41.50 86.27 27.00 18.96 83.20	20.55 17.45 34.20 72.97 23.18 16.27	17.6 15.4 14.1 14.2 14.2	1 KR R R R R R R R R R R R R R R R R R R	41.10 104.70 68.40 145.94 92.72 97.62 71.41	
LOI AAAAAAA PRI 21 21 21 21 21 21 21 21 21 21 21 21 21 2	PAGE 5 IRISONE CRM DANE TAB 60MG IRISONE CRM EMARIN TAB 0.625MG ZORAL CREAM 2% ROIL TAB 15MG NITRAN SYS 0.4MG/HR AZIDE CAP 25/37.5MG DSOPHEN TB 16.2MG RUG	15GMB 100B	16.13 88.62	13.84 74.96	14.2	1 R 1 K R	27.68 74.96	
AAA AAAA PRI	EMARIN TAB 0.625MG ZORAL CREAM 2%	1000B 30GMB	343.03 21.66	290.150 18.59	15.4	1 K R 1 K R 1 K R 1 K R 1 K R 1 K R	58.04 290.15 37.18 31.48 34.61 298.29 7.80	
B I EA NAI	ROIL TAB 15MG WITRAN SYS 0.4MG/HR	100g	36.67 40.32	31.48 34.61	14.2	1 R 1 R	31.48 34.61	
I EA DY	SOPHEN TB 16. 2MG RUG	1000 5	13.01	7.86	40.0	ikk	7.80	
DIE DE LA AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	PAGE 6 ANTIN-125 SUSP CA 237 M ARIN-VAG CRM 0.625MG ARIN-VAG CRM NMC 2. BU NOVUM 7/7/7 DIALPAK BEPRYLETAB 5MG SOM (IL TAB 20 NG RAFATE TAB 1GM RDIZEM CD CAP 24 0MG JMADIN TAB 2.5MG	1-80ZB 1-50ZB 750ZB 6X28B 100B 100B	27.04 29.29 6 4.94 133.86 129.54 181.928 70.886	23.21 25.14 2.80 113.22 111.19 156.15 57.57	14 · 2 14 · 3 443 · 3 415 · 4 14 · 2 14 · 8 14 · 8	1 R 1 R 1 K 1 K 1 K 1 K 1 K 1 K 1 R	23.21 50.28 11.20 113.22 222.38 312.30 1262.54 92.70	
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CA-	UI-7	"W"	ND	C # 5			
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(2)	00062-	1781-22	#305	(25)	00046-0867	-91	# 334
3		0146-30	l l	(26)	50458-0221	- 30	# 296
<u>(4)</u>		0165-40	•	(2)	00071-0270	1-24	# 288
<u>(S)</u>		2269-50	#274	(18)	00089-0303	-03	#277
6	00677-0		# 264	29	00108-3590	-30	# 182
Ō	00085-	0820-03	#324	(30)	00536-3920	-10	#236
(i)	00182-1	610-60	# 118	$(\overline{z})$	-00071-2214	1-20	#170
<b>①</b>			#206	(3)	00046-0872	-01	#334
<u></u>	00536-3	332-01	#109	(33)	23317-0700-	.78	#400
Ŏ	00536-4	651-05	#381	(34)	00062-1781-	15	#305
	00364- 04		#334	(હેં)	39506-0011-2	25	# 184
93	00085-06		#348	િછ	00029-3211-	20	#311
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(T)	00048-11	, , , , , , , , , , , , , , , , , , ,	#374		00088-1797-	-42	#129
(Ib)	00085-06	14-03	#348	39	00056-0176	-70	#152
0	00075-001	10-37	# 1/ <i>]</i>	(40)	58887-0027	-30	#375
(18)		* • •	#415	(47)	00074-6290-	-60	#311
(19)	00597-008	2-14	# 110	(¥2)	00003-0482.	50	# 126
(20)			#93	(43)	08290-3284-	66	#114
(2)	00081-0249	î- 75 -	#250	(45)	08290-3284	-11	#114
(22)	00085-092	4-01	#257	(FS)	08290-3284-	66	# 114
23	00068-072		#360	(46)	08290-3284	- // <b>Y</b>	#114





IF PAYING BY INVOICE, PLEASE REMIT

	O MEHCK HUMAN HEALTH DIVISION	TERMS:	participation				
	POTENTIAL POTENTIAL PROPERTY OF THE PROPERTY O			e j	Çıβê tî, eğenek	CHESTIC CHES	
	্তিক কুর্নিট্রেলি (১ -১০) ক জা	* * * * * * * * * * * * * * * * * * * *		F Hills Li	13 中桥水流景景	0A 90040	<b>)</b>
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3	TIMOPTIC SECT OCUMETE PRILOSEC 20HG CAPSU		336712	.3	37,44 60,98	118.32	<del></del>
15	S CHEFCID AONG TABLETS	1.00UU <b>E</b>		1. 33 35 g	229.50	229.50	
0-6	MEVACOR TOME TABLETS	60 <b>E</b>	356061	1	58.95	56.95	
1-6	MEVACOR ZONG TABLETS	60 <b>B</b>	356161	රු	95.83	574.98	
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WE H	6 (REV. 9:05)  HEREBY GUARANTEE THAT THE ARTICLES LISTED HEREIN ARE NOT A NING OF THE FEDERAL FOOD, DRUG AND COSMETIC ACT AND ARE NOT INTERSTATE COMMERCE UNDER THE PROVISIONS OF SECTION 404 (1) NETERSTATE COMMERCE UNDER THE PROVISIONS OF SECTION 404 (1) NETHOLOGIC IN COMPUTANCE WITH THE REQUIREMENTS OF THE FA E TO MERCHANDISE PASSES TO BUYER AT POINT OF SHIPMENT.	DULTERATED OR MISBRANDE	D WITHIN THE	OT. WGT.	TOT. QTY.		
NTO	INTERSTATE COMMERCE UNDER THE PROVISIONS OF SECTION 404 ( N PRODUCED IN COMPLIANCE WITH THE REQUIREMENTS OF THE FA	OR 505 OF SAID ACT, AND TH	AT THEY PAVE	1704	20	1,761,73	



STATEMENT DATES 07/31/94

CUSTOMER NO. 1053165

CODE:

1 OF

20 INVOICE

21 RETURNED GOODS CREDIT

22 ALLOWANCE

96 CASH REMITTANCE UNAPPLIED

97 UNEARNED DISCOUNT

98 OVER/UNDER PAYMENT TO ADJUST

KENNEYS DRUG STORE 73501 29 PALMS HWY TWENTY NINE PALH CA 92277 8-9-94 C/RIT C/909: TERMS

REMIT TO: MERCK & CO., INC HUMAN HEALTH DIVISION

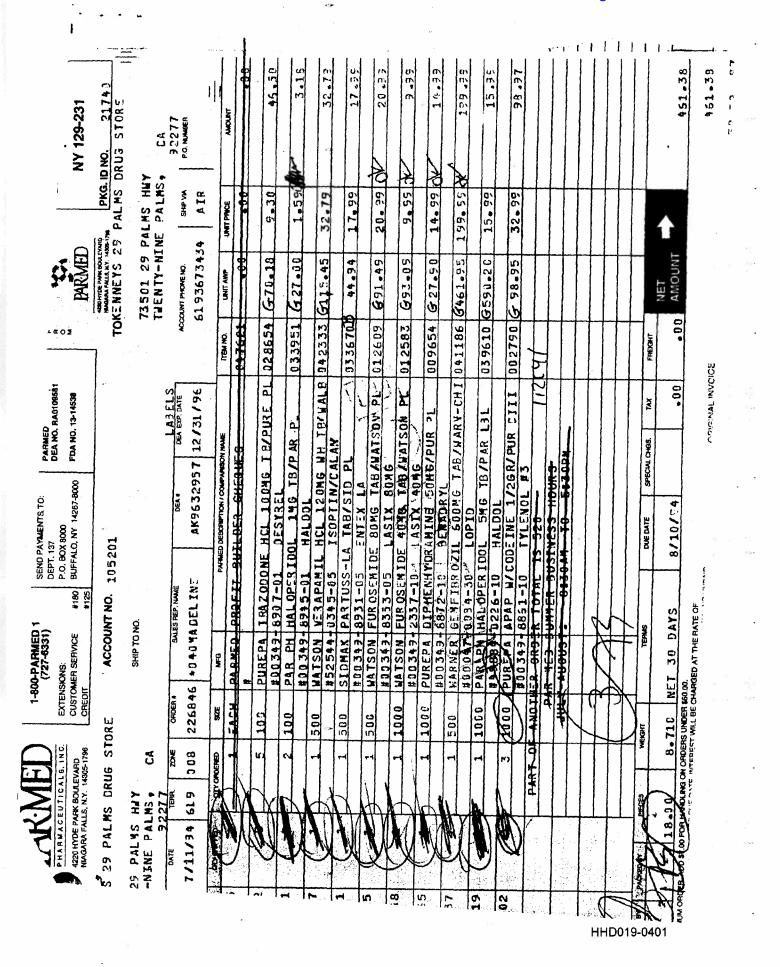
FILE 53711 LOS ANGELES, CA 90074-3711

1-800-MERCKRX

2% 15TH PROXIMO NEOM

DE	RVOIGE DATE	NUMBER	PURCHASE OFCER NUMBER	GURRENT	PAST DUE	FU'UPE DATE	INVERCE AVGENT
20 20 20 20 20	07/01/ <del>94</del> 07/18/94 07/18/94	382 384 385 383 386		1,761.73 1,046.75 356.37	452	10/18/94 10/20/94	183.66 177.63
	-Si ;1	-		12			
3							1
,	96	•	19 11		<b>-</b> 459		
	(1) (4) - (4) - (2) (2)						

.00 .00 3,164.85 .00 PAST DUE TOTAL **JOUNT DATE** 08/15/94 **CURRENT TOTAL JUNT OF LAST PAYMENT** 3,164.85 **FUTURE TOTAL** LUDING DISCOUNT 361.29 6,010.09CR T PAYMENT RECEIVED STATEMENT TOTAL 3,526.14 FA 28 (REV. 0/85) TOT. WGT. TOT. QTY. 1/03 12 1,046.75





CODES:

IN - INVOICE

DM - DEBIT MEMO

CH - CREDIT MEMO

# STATEMENT

SEND REMITTANCE TO: DEPARTMENT 137 P.O. BOX 8000 Buffalo, N.Y. 14267-8000

KENNEYS 29 PALMS DRUG STORE

73501 25 PALPS HWY TWENTY-NINE FALPS, CA 52277

STATEMENT DATE	CUST. ACCT. NO.	SALESPERSON
8/01/54	105201	MACELINE C.

NUMBER	INVOICE DATE	DUE DATE	CODE	ORIGINAL INVOICE	CREDITS	REMAINING BALANCE
954470 007894 016786 021553 021740 021741 955999	4/13/54 5/24/54 6/22/54 7/08/54 7/11/54 7/11/54 7/25/54	5/13/54 7/23/54 7/22/54 8/07/54 8/10/54 8/10/54 7/29/54	IA IA IA IA IA FC	49.59 495.54 513.17 522.57 461.38 58.59	<b>5.00-</b>	7-12-99 44.E5 499.94 E13.17 E22.57 461.38 E8.E9 2.E3
	Cr <sup>up</sup>	10 10	900 74	Pd 2	194 19106.	
		ž.				
CURRENT 2058.	OVER 30 I				ECHARGES	TOTAL DUE  2 1 C3 47  REFLECTS PAYMENTS POSTED

WILL BE CHARGED AT THE RATE OF 2% FOR EACH MONTH OR FRACTION THEREOF (24% ANNUAL RATE) THAT THE BAL

HHD019-0402

IF ACCOUNT REMAINS UNPAID AFTER DUE DATE, INTERES

# Confidential Pharmacy Information Form

Pharmacy Name:	Kenneys Drug Stone	
Address:	72E01_20_D_1 II	
Address:	73501 29 Palms Hwy	
	29 Palms,cA	
•	Twenty nine Palms, california 92277	
	. 454	
Phone Number:	¢1( #48 #\$#\$ 619-367-3434 for	610-367-1648
	Section 1	
Contact Person:	Carol Barrett	
		:
	Type of Pharmacy	
	(Check Appropriate Block(s))	
• :	Acad School 3 Dharman	_
7	endent Retail Pharmacy	<b>3</b>
Chair Oth	(four or more stores) Pharmacy	
·	Nursing Home Pharmacy	П
<i>;</i> *	Hospital Outpatient Pharmacy	
	Home I.V. Pharmacy	n
	Mail Order Pharmacy	
	County Public Health Unit Pharmacy	
	Public Health Entity	D D

ACCOUNT NUMBER PURCHASE ORDER SHIP TO: ... DRUG ZY PALMS HWY PALMS 92277 CUSTOMER DEA UPJOHN DEA AK9632957 39-02-205 UPJOHN TAX # 38-1123360 PT0021713 NOC 0009 PRODUCT DESCRIPTION UOU HALCION TABS 0. 125MG C-IV 5. 17 122.76 286-03 PROVERA TABS 5MG 40.92 PROVERA TABS 2. 5MG 64-04 ., 27, 12 81.36 MICRONASE TABS 5. OMG 171-06 203. 69 203.69 MICRONASE TABS 2.5MG 54.88 141-01 27.44 PROVERA TABS 10MG 152.10 50-02 50.70 Order was taken by L.M. Dotter Order Phone Number 1-800-821-7000 REMIT TO: THE UPJOHN COMPANY TERMS INV. DATE 9/15/94 # 62244 SX UNTIL INVOICE **ANGELES** CA 90088 HET 9/25/94 7/28/94 666, 49 TOTAL

### EXPLANATION OF CLAIM POLICY

B . SPECIAL QUOTATION

E - PARTIAL BOTTLE

A = CONTRACT PRICE

D = UPJOHN USE ONLY

NSACTION CODES:

ERPORTING SHORTAGE, EXAMINE PACKING CAREFULLY, NO CLAIM FOR SHORTAGE OR DAMAGE WILL BE ALLOWED UNLESS MADE TEN (10) DAYS FROM RECEIPT OF GOODS. RETAIN DAMAGED MERCHANDISE AND PACKAGE FOR INSPECTION. IMMEDIATELY REPORT ANY AGE OR DAMAGE TO YOUR REGIONAL DISTRIBUTION CENTER.

C = CONTROLLED SUBSTANCE

F = OWN USE PRICE

NTEMENT CONTAINED ON ANY PURCHASE ORDER OR SIMIL/AP DOCUMENT WHICH IS NOT SPECIFICALLY APPROVED OR ACKNOWLEDGED NG BY THE UPJOHN COMPANY WILL NOT BE CONSIDERED AS PART OF THE AGREEMENT BETWEEN THE PARTIES.

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YOUR ACCOUNT NUMBER STATEMENT DATE OPEN ITEM STATEMENT Charges are removed from this Statement when third. Payments test are applied to a specific charge are not shown on the statement. 39-02794 <u>Upjohn</u> 08-26-94 PAGE FUTURE DATED NOT DUE CHANGES CREDITS DATED AS OF PURCHASE ORDER NO. CURRENT AMOUNT PAST DUE AMOUNT TRANSACTIONS NUMBER TYPE DATE 309.29 06-01-94 1,131.03 FD 06-21-94 78.93 FD 06-30-94 966 666.49 11-25-94 ENV 07-28-94 067 FD 068 07-28-94 401.48 12-25-94 THY 08-11-94 **þ69** FD 08-11-94 a vad. 253547.

STATEMENT QUESTIONS:

CALL 1-800-290-7362

51.75

LESS DISCOUNT

VR - CHECK ISSUED
CREDIT BALANCE OR
DUPLICATE PAYMENT REFUNDED
NSF OR STOP PAYMENT CHECK

NET DUE BEFORE 15TH

AMOUNT

440.59

21.98

### JE - ADJUSTMENT DISCOUNT NOT ALLOWED UNAUTHORIZED DEDUCTION TRANSACTION TRANSPERRED LPP - LATE PAYMENT PENALTY · INVOICE · CREDIT MEMO · FUTURE DATED PRESTOCK NO CASH DISCOUNT ON THIS INVOICE TAX ADJUSTMENT

2,587.22

DUE AFTER 15TH

AMOUNT NOT YET DUE

FD

462.57

REMIT TO: THE UPJOHN COMPANY	TERMS	INV. DATE		
DEPT # 62244 LOS ANGELES CA 90088	2% UNTIL 9/15/94 HET 9/25/94	S/11/94	INVOICE TOTAL	401. 48
*TRANSACTION CODES: A = CONTRACT PRICE D = UPJOHN USE ONLY		TROLLED SUBSTANCE I USE PRICE		

EXPLANATIONS OF TRANSACTION TYPE

### **EXPLANATION OF CLAIM POLICY**

BEFORE REPORTING SHORTAGE, EXAMINE PACKING CAREFULLY. NO CLAIM FOR SHORTAGE OR DAMAGE WILL BE ALLOWED UNLESS MADE WITHIN TEN (10) DAYS FROM RECEIPT OF GOODS. RETAIN DAMAGED MERCHANDISE AND PACKAGE FOR INSPECTION. IMMEDIATELY REPORT ANY SHORTAGE OR DAMAGE TO YOUR REGIONAL DISTRIBUTION CENTER.

ANY STATEMENT CONTAINED ON ANY PURCHASE ORDER OR SIMILAR DOCUMENT WHICH IS NOT SPECIFICALLY APPROVED OR ACKNOWLEDGED IN WRITING BY THE UPJOHN COMPANY WILL NOT BE CONSIDERED AS PART OF THE AGREEMENT BETWEEN THE PARTIES.

V ORDER:	ERVICES:		DATE	7708794			(34355	AMOUNT	17.5	25.13	68.24	55,13	98.70	} •					A pay last amount this column	-
ORIGINALIMAVOICE TO PLACE AN ORDER:	16003274414 ALL OTHER SERVICES:	18004452455	ER INVOICE NUMBER	80008532	DRUG STORE GHWAY CA 92277	ORDER NUMBER	000000000000000000000000000000000000000	E UNIT PRICE 0	SC+7.84 R	- OK25.19 R	JE68.25 R	0655.13 R	<u>,</u>	<b>5</b> . 6	7,77			.*	** PRICE CODES R - REGULAR C - CONTRACT H - HAND PRICE S - SHORT DATED P - PROMOTION	reby agrees to all of the above
	INE LABS (CM) AN BRANCH GENERAL STREET	SEVENIH D CUCAMON	CUSTOMER NUMBER	PO.* x	RENNEYS 29 PALMS HI TAENTYNINE PALMS HI	TC S SHIPVIA	21 01 UPS GROUND 000:	DESCRIPTION STRENGTH SIZE	LA TAB 75 MG	00182173041VFRUNETH H/DN CGH SYR 15MG/M GAL	PROXEN SOOMS TABS 500 MS D	PROXEROSTSMG TABS 375 MS D		w did	Mar June	alessan .	NAME OF THE PARCE		bject to a LATE PAYMENT CHARGE of 1-16% per month or 18% per annum (or the tast) on all amounts due over thirty (30) days. The oxder for the goods set forth act to have been accepted at the home office of the seller in Broward County, Florida.  Costs of collection including Court Costs and reasonable attorney's fees.  Cort of the reported within 12 hours. No returns will be attached that and additional prior additional Scientification.	thank Customer, by acceptance of merchandise, hereby agrees to all of the above you! Terms and Conditions
	•	ILLINDIS 60693 11380 RANCHO	WHSE LOCATION	CPP RPP	ACCOUNTS PAYABLE S 29 PALMS DRUG STORE 31	CED NI IMBER GROTYPE ISR TSR TERMS	R FP01	S C NDC/UPC NUMBER	SHIPPED 8/0  * 001821722605 PHEWLFENESIN	1 - 00182173041VFR	71/ 00182192305 MAPRUXEN	00182192205 MAPROXENOSTONG		-					The above order is sulmaximum permitted by mon this invoice is deem?". The agrees to pay all factors must attent will be attent will be	1900 to 1900 t
Goldline Laboratories			EOBM 222 #		SOLD TO: ATTN: ACCOURTENING SP COBB6031	IN OGO GODWIN VOO	<u> </u>	11 5	ORDERED 1.	RPP (5) 1	RPP 8-102-A	RPP 122-E	Крр	41.0					0/10/9 7/11/9 7/20/9	,
4														es.				// // HH	D019-0406	•

ATTN: ACICOL KENNEYS 29 OOBBAGO31 OOBBAGO31 OOBDERED SHIPPED ATT A 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
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